

TENNESSEE BOARD FOR LICENSING CONTRACTOR

500 JAMES ROBERTSON PARKWAY, SUITE 110

NASHVILLE, TENNESSEE 37243-1150

(615) 253-4710 or 253- 5741 or (800) 544-7693 or Fax (615) 532-2868

NO FEE

APPLICATION FOR NAME CHANGE

License ID#: 000_____

Expiration Date:_____

Current Licensed Mode of Operation: __Individual/Sole Prop. __Corporation __Partnership __LLC

Current Name on License:_____

Address:_____

Address Change: __ **Yes** - *Address above indicates new address* / __ **No** - *There has been no change*

Owner(s)/Officers and Titles (may submit attachments):

1. _____ 2. _____

3. _____ 4. _____

Qualifying Agent(s):_____

(Person(s) who passed exam or designated employee/ officer)

Current complaints or judgments against this company? __No __Yes – Attach Explanation

NEW COMPANY NAME INFORMATION

New Company Name :_____

Has there been a change in officers or titles: ____**No** ____***Yes** - List below and complete “Contractor’s Affidavit” on back, sign and notarize. Change in owners must apply for a new license.

1. _____ 2. _____

3. _____ 4. _____

Has Qualifying Agent Changed __**No** __**Yes** - **Name:**_____ **SS#** _ _ _ - _ _ - _ _ _

CHECK LIST/ATTACHMENTS

1. ____ Attach a copy of any applicable certificate, such as an amended Charter, Articles of Organization, Certificate of Authority. (These may be obtained from the Tennessee Secretary of State’s office at (615) 741-2286 or www.state.tn.us/sos)
2. ____ License renewal submitted __ No – License is current __ Yes – Renewal is pending
(If “Name Change” is submitted at renewal time, you may receive the revised license before the renewed license)
3. ____ Contractor’s Affidavit for Name Change – Signed and notarized, for new officers or QA’s
4. ____ Do you have pending in our office: __Renewal __Revision of Classification or Limit __Other:_____

***NOTE: If there has been a change in ownership, merger, reorganization or purchase by nonstockholders, please notify our office for the "Application for Contractors License" instead of completing this form!**

IN-1322 (Rev.7/03)

RDA 1578

CONTRACTOR'S AFFIDAVIT – NAME CHANGE REQUEST

1. _____
(Contractor) (New name as to be licensed)
- Mode of Operation:** { } Corporation { } Partnership { } Individual { } Limited Liability Company
-
2. To the best of my knowledge, information, and belief, a petition in bankruptcy { } ***HAS { }** **HAS NOT** been filed within seven (7) years preceding the filing of this application from any person who is an officer, owner, partner of this entity. *(If such petition has been filed, attach information and an explanation of the proceedings hereto as part of affidavit.)*
-
3. As "Contractor" (owner/proprietor or partner, officer, director, qualifying agent or major stockholder) with this company, firm, or corporation, do hereby affirm, I/we { } ***HAVE { }** **HAVE NOT** been convicted of a felony, participated in any other conduct which constitutes improper, fraudulent, or dishonest dealings, involvement with any company who is in violation of T.C.A. 62-6-118. *(If you checked "HAVE", please attach an explanation.)*
-
4. As "Contractor", I/we { } ***HAVE { }** **HAVE NOT** bid, offered to engage or performed any construction, in the State of Tennessee, where the amount of the contract would require a license to engage in contracting, in the new name to be licensed. If so, please attach an explanation.

I/we affirm in applying to the Tennessee Board for Licensing Contractors for a license name change to engage in contracting with the State of Tennessee, hereby depose and say as follows:

Information provided in this application is true and correct, submitted to the Board for Licensing Contractors for the express purpose to change the license name of contractor's license, in the State of Tennessee. Further, there has been no change in ownership, merger or reorganization pursuant to bankruptcy, which requires a new license.

***If you checked "HAVE" or "HAS", please attach explanation-**

The individual, owners, qualifying agent(s), partners, major officers, controlling stockholders, or Chief Executive Officer duly authorized by the Board of Directors, with this entity, must execute this affidavit

| | | |
|-----------------------|------------------|----------------------|
| _____ (Print Name) | _____ (Title) | _____ (Signature) |
| _____ (Print Name) | _____ (Title) | _____ (Signature) |
| _____ (Print Name) | _____ (Title) | _____ (Signature) |
| _____ (Print Name) | _____ (Title) | _____ (Signature) |
| _____ (Print Name) | _____ (Title) | _____ (Signature) |

Subscribed before me this _____ day of _____, 20 _____.

(NOTARY PUBLIC)

(SEAL)

My Commission Expires: _____

State of _____

County of _____